



DOCKET NO. J&J-5037-CIP1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Alain V. Khaiat et al.

Serial No.: 10/663,238

Art Unit: 1615

Filed : September 16, 2003

Examiner:

For : TOPICAL TREATMENT OF SKIN CONDITIONS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

April 28, 2004

(Date of Deposit)

Andrea L. Colby

(Name of applicant, assignee, or Registered Representative)

(Signature)

April 28, 2004

(Date of Signature)

Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Alain V. Khaiat, Anna Gomes, and Vaishali Bhide, entitled TOPICAL TREATMENT OF SKIN CONDITIONS, attorney Docket No. J&J 5037-CIP-1, to complete, pursuant to Rule 51, this application filed on September 16, 2003 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/J&J 5037-CIP-1/ALC in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/J&J-5037-CIP-1/ALC. This sheet is submitted in triplicate.

Respectfully submitted,

Andrea L. Colby

Andrea L. Colby
Reg. No. 30,194
Attorney for Applicant

05/05/2004 BABRAHA1 00000083 100750 10663238

01 FC:1051 130.00 DA

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
(732) 524-2792



Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	J&J5037CIP1		
	First Named Inventor	V. Bhide et al.		
	COMPLETE IF KNOWN			
	Application Number			
	Filing Date			
	Group Art Unit			
	Examiner Name			
<p>As a below named inventor, I hereby declare that:</p> <p>My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p>				
<p style="text-align: center;">TOPICAL TREATMENT OF SKIN CONDITIONS (Title of the Invention)</p>				
<p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto</p> <p>OR</p> <p><input type="checkbox"/> was filed on (MM/DD/YYYY) <input type="text"/> as United States Application Number or PCT International Application Number <input type="text"/> and was amended on (MM/DD/YYYY) <input type="text"/></p> <p>I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.</p>				
<p>I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.</p>				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
10/439,735	May 16, 2003	Pending Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777**

Place Customer
Number Bar Code
Label Here

AND

☐ Practitioner(s) named below:
Name

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Andrea L. Colby at telephone number (732) 524-2792.

Direct all correspondence to: ☒ Customer Number **000027777** OR ☐ Correspondence address below

Name:

Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Alain V.		Family Name or Surname Khaiat	
Inventor's Signature		Date	
Residence: City Singapore	State	Country Singapore	Citizenship France
Mailing Address 3 Meyer Place 09 -01			
City Singapore	State	ZIP 437991	Country Singapore

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Anna		Family Name or Surname Gomes	
Inventor's Signature <i>Anna b. Gomes</i>		Date 24/11/08	
Residence: City Dulwich Hill	State	Country Australia	Citizenship Australia
Mailing Address 15 Macarthur Parade NSW			
City Dulwich Hill	State	ZIP 2203	Country Australia

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Vaishali		Family Name or Surname Bhide	
Inventor's Signature		Date	
Residence: City Maharashtra	State	Country India	Citizenship India
Mailing Address 4 Purnima Apartments Mhasoba Maidan, Kalyan Dist. Thane			
City Maharashtra	State	ZIP 421304	Country India



Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)

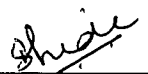
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	J&J5037CIP1		
		First Named Inventor	V. Bhide et al.		
		COMPLETE IF KNOWN			
		Application Number			
		Filing Date			
		Group Art Unit			
		Examiner Name			
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR					
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: <div style="text-align: center;">TOPICAL TREATMENT OF SKIN CONDITIONS (Title of the Invention)</div> the specification of which <input checked="" type="checkbox"/> is attached hereto OR <input type="checkbox"/> was filed on (MM/DD/YYYY) <input type="text"/> as United States Application Number or PCT International Application Number <input type="text"/> and was amended on (MM/DD/YYYY) <input type="text"/> I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					

DECLARATION - Utility or Design Patent Application										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; padding: 2px;">Application Number(s)</th> <th style="text-align: center; padding: 2px;">Filing Date (MM/DD/YYYY)</th> </tr> </thead> <tbody> <tr> <td style="height: 60px;"></td> <td></td> </tr> </tbody> </table>	Application Number(s)	Filing Date (MM/DD/YYYY)			<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; padding: 2px;">Filing Date</th> <th style="text-align: center; padding: 2px;">Status</th> </tr> </thead> <tbody> <tr> <td style="height: 60px; vertical-align: top;">May 16, 2003</td> <td style="vertical-align: top;">Pending Patented Patented</td> </tr> </tbody> </table>	Filing Date	Status	May 16, 2003	Pending Patented Patented	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
Application Number(s)	Filing Date (MM/DD/YYYY)									
Filing Date	Status									
May 16, 2003	Pending Patented Patented									
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:										
<div style="display: flex; justify-content: space-between;"> <div> <p>I hereby appoint:</p> <p><input checked="" type="checkbox"/> Practitioners at Customer Number 000027777 →</p> <p style="margin-left: 40px;">AND</p> <p><input type="checkbox"/> Practitioner(s) named below:</p> <div style="display: flex; justify-content: space-between; margin-left: 40px;"> <div style="text-align: left;"> <p><u>Name</u></p> </div> <div style="text-align: left;"> <p><u>Registration Number</u></p> </div> </div> </div> <div style="text-align: right; margin-top: 20px;"> <p>Place Customer Number Bar Code Label Here</p> </div> </div>										
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.										
Address all telephone calls to Andrea L. Colby at telephone number (732) 524-2792.										
<div style="display: flex; justify-content: space-between;"> <div> <p>Direct all correspondence to:</p> </div> <div> <p>Customer Number</p> <p><input checked="" type="checkbox"/> or Bar Code Label 000027777</p> </div> <div> <p>OR</p> <p><input type="checkbox"/> Correspondence address below</p> </div> </div>										
Name:										
Address:										
Address:										
City:	State:	ZIP								
Country	Telephone:	Fax:								

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Alain V.		Family Name or Surname Khaiat	
Inventor's Signature		Date	
Residence: City Singapore	State	Country Singapore	Citizenship France
Mailing Address 3 Meyer Place #09-01			
City Singapore	State	ZIP 437991	Country Singapore
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Anna		Family Name or Surname Gomes	
Inventor's Signature		Date	
Residence: City Dulwich Hill	State	Country Australia	Citizenship Australia
Mailing Address 15 Macarthur Parade NSW			
City Dulwich Hill	State	ZIP 2203	Country Australia
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Vaishali		Family Name or Surname Bhide	
Inventor's Signature 		Date	
Residence: City Maharashtra	State	Country India	Citizenship India
Mailing Address 4 Purnima Apartments Mhasoba Maidan, Kalyan Dist. Thane			
City Maharashtra	State	ZIP 421304	Country India



Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	J&J5037CIP1		
	First Named Inventor	V. Bhide et al.		
	COMPLETE IF KNOWN			
	Application Number			
	Filing Date			
	Group Art Unit			
	Examiner Name			

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TOPICAL TREATMENT OF SKIN CONDITIONS
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number
 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application		
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.		
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
Application Serial No.	Filing Date	Status
10/439,735	May 16, 2003	Pending Patented Patented
I hereby appoint: <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Practitioners at Customer Number 000027777 → AND <input type="checkbox"/> Practitioner(s) named below: <div style="display: flex; justify-content: space-between; width: 80%;"> <u>Name</u> <u>Registration Number</u> </div> </div> <div style="text-align: right;"> Place Customer Number Bar Code Label Here </div> </div>		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.		
Address all telephone calls to Andrea L. Colby at telephone number (732) 524-2792.		
Direct all correspondence to: Customer Number <input checked="" type="checkbox"/> or Bar Code Label 000027777 OR <input type="checkbox"/> Correspondence address below		
Name:		
Address:		
Address:		
City:	State:	ZIP
Country	Telephone:	Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Alain V.

Family Name
or Surname Khaiat

Inventor's
Signature

Date

17/09/03

Residence: City Singapore

State

Country Singapore

Citizenship France

Mailing Address 3 Meyer Place #09-01

City Singapore

State

ZIP 437991

Country Singapore

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Anna

Family Name
or Surname Gomes

Inventor's
Signature

Date

Residence: City Dulwich Hill

State

Country Australia

Citizenship Australia

Mailing Address 15 Macarthur Parade
NSW

City Dulwich Hill

State

ZIP 2203

Country Australia

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Vaishali

Family Name
or Surname Bhide

Inventor's
Signature

Date

Residence: City Maharashtra

State

Country India

Citizenship India

Mailing Address 4 Purnima Apartments
Mhasoba Maidan, Kalyan
Dist. Thane

City Maharashtra

State

ZIP 421304

Country India